CHECK or PURCHASE ORDER (PLEASE CIRCLE ONE)

Vei	ndor			
Name Address City Vendor #	StateZIP			
Tax ID #				
QTY	DESCRIPTION	UNIT PRICE	TOTAL PRICE	ACCOUNT NUMBER
SubTotal before tax				
S		ales Tax (6.75%)		
		TOTAL		
Department Head Approval Fir		nance Approval in accordance with G.S. 159-26(d)		
Date		Date		

A Purchase Order must be obtained and have Finance approval for all items costing \$300 or more before placing orders.

(FIN1-11/01)